

Part-Time Application For Employment



City of Germantown

1930 S. Germantown Road
Germantown, TN 38138
www.germantown-tn.gov

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, medical or disability, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For:	Date of Application
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How Did You Learn About Us?		
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-In
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other: _____

Last Name		First Name		Middle Name	
Address		City		State	Zip Code
Telephone Number(s) Home:			Cell:		

Please check ☒ appropriate box.

Hire is subject to verification of age.

- Have you ever filed an application with us before? ☐ Yes ☐ No
If Yes, give date: _____
- Have you ever been employed with us before? ☐ Yes ☐ No
If Yes, give date: _____
- Are you currently employed? ☐ Yes ☐ No
- May we contact your present employer? ☐ Yes ☐ No
- Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? ☐ Yes ☐ No
(Proof of citizenship or immigration status will be required upon employment)
- On what date would you be available for work? _____
- Are you available to work: ☐ Full Time ☐ Part Time ☐ Temporary
- Are you currently on "lay-off" status and subject to recall? ☐ Yes ☐ No
- Have you been convicted of a felony within the last 7 years? ☐ Yes ☐ No
(Conviction will not necessarily disqualify an applicant from employment.)
If Yes, please explain :

EDUCATION

School Name and Location:					
Grade/Years Completed	<i>Elementary School</i> 3 4 5	<i>Middle School</i> 6 7 8	<i>High School</i> 9 10 11 12	<i>Undergraduate/College</i> 1 2 3 4	<i>Graduate/Professional</i> 1 2 3 4
Diploma/Degree					
Describe Major Course of Study :					

List professional, trade business or civic activities and offices held.

You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, disability or other protected status:

REFERENCES

Give name, address and telephone number of three references who are not related to you and are not previous employers.

1. _____
2. _____
3. _____

FORMER EMPLOYERS (LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH THE MOST RECENT ONE FIRST)

DATE MONTH AND YEAR FROM TO FROM TO FROM TO FROM TO	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING

PHYSICAL RECORD:

DO YOU HAVE ANY PHYSICAL LIMITATIONS THAT PRECLUDE YOU FROM PERFORMING ANY WORK FOR WHICH YOU ARE BEING CONSIDERED? ☐ YES ☐ NO IF YES, WHAT CAN BE DONE TO ACCOMMODATE YOUR LIMITATION? _____

PLEASE DESCRIBE: _____

IN CASE OF EMERGENCY NOTIFY: _____
Name Address Phone

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU. I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PRIOR NOTICE."

DATE: _____ **SIGNATURE:** _____

DO NOT WRITE IN THIS BOX, OFFICE USE ONLY

INTERVIEWED BY: _____ DATE: _____

COMMENTS: _____

HIRED: ☐ YES ☐ NO POSITION: _____ DEPARTMENT: _____

SALARY/WAGE: _____ DATE REPORTING TO WORK : _____

APPROVED BY: _____
Personnel Director Department Director City Administrator

CITY OF GERMANTOWN

1930 South Germantown Road, Germantown, TN 38138

Phone: (901) 757-7274 - Fax: (901) 751-7550

PRE-EMPLOYMENT BACKGROUND INVESTIGATION CONSENT FORM

The undersigned, referred to as "Applicant", hereby authorizes the City of Germantown either directly or through its agent to investigate Applicant's background. This may include information as to character, financial responsibility, criminal and/or civil records. Records from public and private sources may be reviewed concerning criminal history, civil court cases, credit history and references. Applicant acknowledges that a fax or photographic copy shall be as valid as the original. Applicant further understands that a complete disclosure of the nature and scope of this investigation may be obtained by a written request received within ninety days.

This information below is required to obtain requested records and must be completed by all Applicants. The City of Germantown requests this information for the sole purpose of facilitating the investigation of Applicant. Certain information provided herein by Applicant will not be considered or used by the City of Germantown in determining whether Applicant will be accepted as an employee. This information is denoted below by an asterisk (*). Please **PRINT CLEARLY** all information below.

Last Name	First	Middle
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Other Names Used

Current Address	City/State/Zip	How Long?
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Previous Address	City/ State/Zip	How Long?
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Date of Birth (required)*	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Social Security Number
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Driver's License Number	Issuing State	Expiration
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I hereby authorize, without reservation, any law enforcement agency, company, institution, credit bureau, or references contacted by the City of Germantown or its agent, to furnish the information described above.

Applicant Signature: _____ Date: _____

NOTICE

THE CITY OF GERMANTOWN

**PRE-EMPLOYMENT
MEDICAL EXAMINATION**

The City of Germantown Pre-employment Medical Examination will include a laboratory test to determine alcohol or drug use. The results of the examination will be released to the Office of Human Resources.